MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

10/590520

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ʳ AMENDMENT		AFTER 2ᴺᵈ AMENDMENT			AS FILED		AFTER 1ʳ AMENDMENT		AFTER 2ᴺᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2		/		/			52						
3		/		/			53						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	6	↓	6	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	21	←	17	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	27		23				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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